

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.J.P.E. CLASSIFIER		19	123-01
FORMALITY REVIEW	MT	523	09-107-101
RESPONSE FORMALITY REVIEW	12177	780	4-5-0

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
○	Allowed	I	Interference
-	(Through numeral)..	Canceled	Appeal
+	Restricted	O	Objected

Claim	Date
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Claim	Date	
First Original	Amend. Original	Amend. Amend.
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If more than 150 claims or 10 actions
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